MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/593,846

FILING DATE

APPLICANT(S)

CLAIMS

CLAIM	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
1	1		1			
2		1	1			
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11						
12						
13						
14						
15						
16						
17						
18						
19		1				
20		1				
21		1				
22		1				
23		1				
24						
25						
26		1	1			
27		1				
28		1				
29		1				
30		1				
31		1				
32						
33		1				
34		1				
35		1	1			
36		1	2			
37			2			
38		1	2			
39		1	2			
40		2	2			
41			1			
42						
43		1	1			
44		1				
45		1				
46		2	2			
47		2	2			
48		2	2			
49		2	2			
50			2			
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIM	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.
51		1	1			
52		1	1			
53		2	2			
54		1				
55		1				
56		1				
57		2	2			
58		2	1			
59	1		1			
60	1		1			
61		1				
62		1	1			
63		1				
64		1				
65		1	1			
66		1	1			
67		2	2			
68		2	2			
69	1	2	2			
70		2				
71		1				
72		1				
73		1				
74		2	2			
75		2	2			
76		2				
77		2	1			
78		2	1			
79		2				
80		2	2			
81		2				
82		2				
83		2				
84		2	2			
85		2	2			
86		2	2			
87		2				
88		2				
89		2				
90		2	2			
91		2	2			
92		2				
93		2	2			
94		2	2			
95		1				
96		1				
97		1	1			
98		1				
99						
100						
TOTAL IND.	3		2			
TOTAL DEP.	121		52			
TOTAL CLAIMS	124		54			

PTO - 1360 (REV. 11/04)